| Decla | aration Control Number (DCN) — | | FOR DO | R USE ONLY. D | O NOT W | RITE OR STAPLE IN THIS SPACE. | | |
|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| AR | ZONA FORM Arizona Individual | Income | Tax D | eclarati | on | | | |
| | Z-8453 for Elec | ctronic I | | | | 2006 | | |
| | For the year January EASE PRINT OR TYPE. | 1 through D | ecember | 31, 2006. | | | | |
| | FIRST NAME AND INITIAL | LAST NAME | | | | YOUR SOCIAL SECURITY NO. | | |
| IF A J | DINT RETURN, SPOUSE'S FIRST NAME AND INITIAL | LAST NAME | | | | SPOUSE'S SOCIAL SECURITY NO. | | |
| PRESE | NT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE APT. NO. | CITY, TOWN OF | POST OFFIC | E | STATE | ZIP CODE | | |
| PAR | I – TAX RETURN INFORMATION | PART II – FINANCIAL INSTITUTION INFORMATION – Must be present when requesting direct debit or deposit. | | | | | | |
| 2 B 3 A 4 R 5 A | rizona Adjusted Gross Income | 00 TYPE OF 00 Ch 00 ACCOUN 00 DIRECT I | ACCOUNT ecking T NUMBER DEBIT REQUES | Savings | ROUT | T DEBIT PAYMENT AMOUNT | | |
| If I hav | return. If I have filed a joint return, this is an irrevocal I do not want direct deposit of my refund or I am not I authorize the Arizona Department of Revenue (DOI withdrawal (direct debit) entry to the financial institut Arizona taxes owed on this return. I also authorize the of taxes to receive confidential information necessary refiled a balance due return, I understand that if DOR does not receive and all applicable interest and penalties. When electronically filing meteronic portion of my state return will also be rejected. | receiving a re R) and its detion account in the financial instruction answer in the full and timely | fund. signated F ndicated ir titutions inv quiries and payment of m | inancial Age to the tax pre volved in the I resolve issu by tax liability by | nt to init paration process les relat April 16, | iate an ACH electronic funds software for payment of my ing of the electronic payment ed to the payment. 2007, I will remain liable for the tax | | |
| Under Part I a my ret ERO o transm of my contac reques | penalties of perjury, I declare that the information I have given my Electron above agree with the amounts on the corresponding lines of the electron urn is true, correct, and complete. I consent to my ERO or OLSP send or OLSP sending such information to DOR through a transmitter. I consider of the properties of the properties of the transmission of my return return or refund is delayed, I authorize DOR to disclose to my ERO, Otts my ERO for a copy of my return, any attachments or schedules to meted documents to DOR. | nic portion of my ding my return ar sent to DOR sen n is accepted, an DLSP and/or tran | 2006 Arizon and accompan ding my ERC d, if the return smitter the re | a income tax re ying schedules o, OLSP and/or n is rejected, the eason(s) for the | turn. To the and state transmitte e reason(s delay, or | ne best of my knowledge and belief, ments to DOR, and I consent to my r an acknowledgement of receipt of b) for the rejection. If the processing when the refund was sent. If DOR | | |
| Sign Here | YOUR SIGNATURE DATE | → | <u> </u> | ICNATURE (If ic | oint roturn | both must sign.) DATE | | |
| PARTI declar will have a copy sched | TIV – DECLARATION OF ELECTRONIC RETURN ORIGING that I have reviewed the above taxpayer's return and that the entries we signed this form before I submit the return. I will give the taxpayer at of this Form AZ-8453. If I am also the paid preparer, under penalties ules and statements, and to the best of my knowledge and belief, they are knowledge. | EINATOR (ER es on Form AZ-8- a copy of all form of perjury, I dec y are true, corre | O) AND PA 453 are comp s and informa are that I hav ct, and comp | AID PREPAR plete and correct ation to be filed we examined the | RER (Sect to the beautiful the A electron and the A electron aration is | ee instructions) est of my knowledge. The taxpayer rizona Department of Revenue and axpayer's return and accompanying | | |
| Only | · | | ARER | EMPLOYED | | | | |
| se O | SIGNATURE OF ERO DATE | | | | SS | SN or PTIN | | |
| ERO Use | FIRM'S NAME (or yours if self-employed) | | | | EI | N | | |
| ш | FIRM'S ADDRESS (include zip code) | | | | (_ TE | LEPHONE NO. (with area code) | | |
| | penalties of perjury, I declare that I have examined the above taxpayer slief, they are true, correct, and complete. This declaration is based on | | | | statement | | | |
| | | | | EMPLOYED | | | | |
| Paid Preparer's Use Only | PREPARER'S SIGNATURE DATE | | | | | SN or PTIN | | |
| uid Pri | FIRM'S NAME (or yours if self-employed) | | | | EII | N | | |
| P | FIRM'S ADDRESS (include zip code) | | | | — (<u> </u> | LEPHONE NO. (with area code) | | |

Arizona Individual Income Tax Declaration for Electronic Filing

PURPOSE OF FORM

- Sign and verify the electronic portion of the Arizona Individual Income Tax Return.
- Authorize the Electronic Return Originator (ERO) to transmit via a third party transmitter.

-OR

Authorize the On-Line Service Provider (OLSP) and/or transmitter to send the electronic portion of the return.

Definitions

"ERO" means Electronic Return Originator, who is someone who prepares your electronic return for you and files your electronic return with the Arizona Department of Revenue (DOR).

"OLSP" means On-Line Service Provider, which is a company that provides software to assist you in the preparation and electronic filing of your return. A company that provides an on-line filing program over the Internet that allows you to prepare and electronically file your return is also an OLSP.

"Transmitter" means a company that electronically transmits your return for filing with the Arizona Department of Revenue.

When and Where to File

If you have used an ERO to file your return, your ERO will retain the original Form AZ-8453. If you use an OLSP to file your return, you must retain the original Form AZ-8453. Do not mail this document to the department unless requested to do so by the department.

LINE INSTRUCTIONS

<u>Declaration Control Number (DCN)</u>: The DCN is a 14-digit number assigned by the ERO or OLSP to each return. This number is to be entered only after the IRS has acknowledged receipt of the electronic portion of the return.

Name, Address and Social Security Number: Print or type the information in the spaces provided. Please verify that the Social Security Number (SSN) is clear and correct. If the return is a joint return, be sure the names and SSNs are listed in the same order as on the electronically filed return.

NOTE: The address must match the address shown on the electronically filed Arizona Individual Income Tax Return.

PART I - TAX RETURN INFORMATION

Enter the corresponding line item information from Form 140, 140A, 140EZ, 140NR or 140PY on lines 1 to 5. Use whole dollars only in this area.

| F | orm 140 Line | Form 140A Line | Form 140EZ Line | Form 140NR Line | Form 140PY Line |
|--------|-----------------|-------------------|--------------------|--------------------|--------------------|
| Line 1 | 16 | 18 | 6 | 19 | 19 |
| Line 2 | 30 | 29 | 15 | 32 | 33 |
| Line 3 | 31 | 30 | 16 | 33 | 34 |
| Line 4 | 54 | 48 | 22 | 54 | 56 |
| Line 5 | 55 | 49 | 23 | 55 | 57 |

Line 5: Do not include payment with Form AZ-8453. Instead, mail it by April 16, 2007 with Form AZ-140V to the address shown on the AZ-140V.

Line 6: The taxpayer must check all applicable boxes on line 6.

<u>Box 6a</u>: If the taxpayer checks box 6a, the taxpayer must ensure that Part II Financial Institution Information is completed.

<u>Box 6b</u>: If there is an amount on line 5 and the taxpayer checks box 6b and is paying by check or money order, mail the payment by April 16, 2007 with Form AZ-140V to the applicable address shown on Form AZ-140V.

<u>Box 6c</u>: If the taxpayer checks box 6c, the taxpayer must ensure that Part III Financial Institution Information is completed.

PART II - FINANCIAL INSTITUTION INFORMATION

Complete only if requesting a direct deposit of a refund or if authorizing a direct debit of tax due or partial amount of tax due.

PART III - DECLARATION OF TAXPAYER

If the ERO makes changes to the electronic return after Form AZ-8453 has been signed by the taxpayer, but before it is transmitted, the ERO must have the taxpayer complete and sign a corrected Form AZ-8453.

PART IV – DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER

The Arizona Department of Revenue requires the ERO's signature. A paid preparer must sign Form AZ-8453 in the space for Paid Preparer's Use Only. Only handwritten signatures are acceptable. If the paid preparer is also the ERO, do not complete the paid preparer's section. Instead, check the box labeled "Check if paid preparer". Please enter your business telephone number so that we may contact you if assistance is needed.

NOTE: If the paid preparer's signature cannot be obtained on Form AZ-8453, you may attach a copy of the tax form. Attach only page 1 of those forms that carry signatures on page 1; or pages 1 and 2 of those forms that carry signatures on page 2.

Conditions Resulting in a Refund By Check

If DOR is unable to process this request for a direct deposit, a refund by check will be generated instead. Reasons for not processing a request include:

- The taxpayer(s) name(s) on the return does not match the name on the account.
- The financial institution rejects the direct deposit because of an incorrect routing or account number.
- · The account type indicator was not selected.

Conditions Resulting in a Failed Electronic Funds Withdrawal (Direct Debit) Request

If DOR is unable to process the request for electronic funds withdrawal, a billing notice will be generated instead. Reasons for not processing a request include:

- The taxpayer(s) name(s) on the return does not match the name on the account.
- The financial institution rejects the direct debit because of an incorrect routing or account number.
- · The account type indicator was not selected.
- · Missing or invalid date of withdrawal.
- · Amount of withdrawal not indicated.

What To Do – if you have not received your refund or your direct debit request has not cleared your bank/ credit union.

First verify with your ERO or OLSP that your return was accepted. If it has been more than three weeks since the department accepted your return and you have not received your refund, call 602-255-3381, or toll-free from 520 or 928 area codes, 800-352-4090.